| PATENT APPLICATION FEE | DETERMINATION RECORD |
|------------------------|-----------------------------|
| Effective Dece | mber 8 2004 |

Application or Docket Number **10/51**8598

| | | | | | • | | | | | | | | |
|--|--|---|---------------------------------|---|----------------------|------------------|-----------------|-------------------|---------------------|----------------------------|-------------------------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | | |
| U.S. NATIONAL STAGE FEES | | | (Column | 11) | 1) (Column 2) | | 7 | RATE | FEE | 1 | RATE | FEE | |
| _ | IC FEE | | SMALL ENT. | = \$ 150 | LARG | GE ENT. = \$ 300 | | | BASIC FEE | | OR | BASIC FEE | |
| EXA | MINATION FEE | E | Satisfies PCT Ar | All other situations = | | | 1 | EXAM. FEE | | | EXAM, FEE | 300 | |
| | | | (4) = \$50/ U.S. is ISA = \$ | \$ 100 / \$ 200 All other situations = | | | 1 | | | | EANIT. FEE | 999 | |
| SEARCH FEE | | | ALL other cour \$ 200 / \$ | \$ 250 / \$ 500 | | | | SEARCH FEE | | | SEARCH FEE | 604 | |
| FEE | FOR EXTRA SI | PEC. PGS. | minu | / 50 ≑ | | | | X \$ 125 = | | | X \$ 250 = | | |
| TOTA | AL CHARGEAB | ILE CLAIMS | ào min | • | | | | X \$ 25 = | | OR | X \$ 50 = | | |
| INDE | PENDENT CLA | AIMS |) m |) minus 3 = . | | | |] | X \$ 100 = | | OR | X \$ 200 = | |
| MUL. | TIPLE DEPENC | DENT CLAIM PRE | ESENT | | | | | 1 | + \$ 180 = | | OR | + \$ 360 = | |
| • If I | the difference | in column 1 is I | less than zero | enter "(|)" in co | nmuk | 2 | | TOTAL | | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | , | SMALL E | | OR | OTHER THAN SMALL ENTITY | | | |
| NTA | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | IBER OUSLY | | RESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT A | Total | 20 | Minus | ** | | 3 | | | X \$ 25 = | | OR | X \$ 50 = | |
| AME | Independent | • 1 | Minus | *** | | 5 | | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | | | |
| | | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colum | mn 2) | (Co | dumn 3) | | | | ٠. | | |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | IEST BER OUSLY | PR | RESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| OME | Total | • | Minus | •• | | = | | | X \$ 25 = | | OR | X \$ 50 = | |
| AMENDM | Independent | • | Minus | *** | | = | | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 1 | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | | • , | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | | | | | | | | | | | | |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.